

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

Date Received

COVER PAGE

2010 JUN 22 PH 1: 14

Please type or print in ink.

A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Horton	Jerome	Edgar	
MAILING ADDRESS STREET	СітУ	STATE ZIP CODE	OPTIONAL: E-MAIL ADDRESS
(Business Address Acceptable)		:	\$
1. Office, Agency, or Court		4. Schedule Summ	ary
Name of Office, Agency, or Court:		► Total number of pages	,
California State Board of Equalizat	ion	including this cover pa	age:
Division, Board, District, if applicable:		➤ Check applicable sche	dules or "No reportable
District 4		interests."	·
Your Position:	**************************************	I have disclosed interes attached schedules:	ts on one or more of the
Member, Board of Equalization		Schedule A-1 Yes	cohodulo attached
► If filing for multiple positions, list ad		Investments (Less than 10% of	
position(s): (Attach a separate sh	eet if necessary.)	Schedule A-2 X Yes -	- schedule attached
Agency:		Investments (10% or Greater	i
		Schedule B X Yes	- schedule attached
Position:	.aaAuhunkuahihunkuAhhihulttifitti AMAAhihuAtitifitti Ahiittifiti Ahiittifiti Aliittifiti A	Real Property	
			- schedule attached
2. Jurisdiction of Office (Che	ck at least one box)	Income, Loans, & Business and Travet Payments)	Positions (Income Other than Gifts
		Schedule D X Yes -	- schedule attached
County of		Income – Gifts	
City of	***************************************	Schedule E X Yes -	- schedule attached
Multi-County		Income – Gifts – Travet Pa	yments
Other	,		r-
	1	No reportable interes	ts on any schedule
3. Type of Statement (Check	at least one box)	Gazzel	
☐ Assuming Office/Initial Date:	mun_o_vend ve_vend vectorious.	5. Verification	
★ Annual: The period covered is Jar	nuary 1, 2009.		
through December 31, 2009.			ole diligence in preparing this dithis statement and to the best
-or-		of my knowledge the inform	ation contained herein and in any
O The period covered is/ December 31, 2009.	, through	attached schedules is true	
Leaving Office Date Left:/_	november of more announced		rjury under the laws of the State going is true and correct.
(Check one)	2000 through the		
O The period covered is January 1 date of leaving office.	, zous, inrough the	Date Signed AMENDME	NT SIGNED June 17, 2010
-or-	-	31.100	lmonin, dav. veari
O The period covered is/ the date of leaving office.	RECEN	Signature	nigned statement with year mind one at 1
Candidate Election Year:			

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

Jerome E Horton

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Horton & Associates	
Name 5777 W. Century Blvd, # 1665, Los Angeles, Calif.	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTI ON OF BUSINESS ACTIVITY	GENERAL DESCRIPTI O N OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$\times \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INVESTMENT Sole Proprietorship Partnership LLC Other YOUR BUSINESS POSITION	NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$1,001 - \$100,000 \$500 - \$1,000 \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) Global Investments; Alliance for California's Tomorrow;	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)
CVS Drug Stores	
► 4. Investments and interests in real property held <u>by</u> the Business entity or trust	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Lecation of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VAILUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Yrust Stock Partnership
Leasenold Other Other	
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2009/2010) Sch. A-2

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Jerome E Horton

STREET ADDRESS OR PRECISE LOCATION 6221 Overhill	► STREET ADDRESS OR PRECISE LOCATION
6773 (B/O/DIII	
CITY	City
Los Angeles CA 90043	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE ;F APPLICABLE, LIST DATE:
\$2,000 · \$10,000 \$10,001 · \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$105,001 - \$1,000,000 ACQUIRED DISPOSED
🔀 Over \$1,000,000	Over \$1,006,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trusl Easement
Leasehold	
Yrs. remaining Other	Yts. remaining Orber
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$C - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499\$500 - \$1,000\$1,001 - \$10,000
∑ \$10,001 - \$109,000 ☐ OVER \$100,000	U \$10,001 - \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	!
Adrienne Dunham; Bernita DeGruy; Tamara	
Adrienne Dunham; Bernita DeGruy; Tamara Jenkins	
Jenkins	
Jenkins You are not required to report loans from commercial leads to the com	ic without regard to your official status. Personal loans
Jenkins You are not required to report loans from commercial leads by the public of business on terms available to members of the public and loans received not in a lender's regular course of the public of tender.	ic without regard to your official status. Personal loans business must be disclosed as follows:
Jenkins You are not required to report loans from commercial leads by the public of business on terms available to members of the public and loans received not in a lender's regular course of the public of LENDER* Chase	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER*
Jenkins You are not required to report loans from commercial leads by the public of business on terms available to members of the public and loans received not in a lender's regular course of the public of Lender* Chase Address Address Acceptable)	ic without regard to your official status. Personal loans business must be disclosed as follows:
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable)
Jenkins You are not required to report loans from commercial leads by the public of business on terms available to members of the public and loans received not in a lender's regular course of the public of Lender* Chase Address Address Acceptable)	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER*
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable)
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 BUSINESS ACTIVITY, IF ANY, OF LENDER	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 6.625 None	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 6.625 None HIGHEST BALANCE DURING REPORTING PERIOD	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial leads business on terms available to members of the publicand loans received not in a lender's regular course of NAME OF LENDER* Chase ADDRESS (Business Address Acceptable) P.O. Box 78148 Business ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 6.625 % None HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	ic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* AOORESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM IMonths/Years)

SCHEDULE C Income, Loans, & Business **Positions** (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Name
Jerome E Horton

▶ 1. INCOME RECEIVED.	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE DF INCOME
Horton & Associates LLC	City of Inglewood (spouse)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5777 West Century Blvd., # 1665, Los Angeles, Calif	One Manchester Blvd.
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SDURCE
Real Estate/Business Consulting	Municipality
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Partner	City Clerk
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	▼ \$10,001 - \$100,000 □ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Spourse's or registered domestic partner's income
Loan tepayment	Loan repayment
Sale of	Sale of(Property, car, boat, etc.)
Commission or Rental Income, itsi each source of \$10,000 or more	Commission of Rental Income, sist each source of \$10,000 or more
Other	Other
Other	(Describe)
Į.	İ
> 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
	lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made available to members of the public without regard to y	
not in a lender's regular course of business must be o	
NAME OF LENDER*	
NAME OF LENDER	INTEREST RATE TERM (MonIhs/Years)
ADDRESS (Business Address Acceptable)	
, , , , , , , , , , , , , , , , , , , ,	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property
\$500 - \$1,000	
S1,001 · \$10,000	City
[] \$10,001 - \$100,000	Guarantor
OVER \$100,000	€4a
FTI 24714 41001000	
	Other(Describe)
	(Describe)
Comments:	(Describe)

SCHEDULE D Income – Gifts



► NAME OF SOURCE ► NAME OF SOURCE Michelle Steel ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) 550 Deep Valley Drive, Ste 355, Rolling Hills Estates BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) VALUE 09 / 23 / 09 \$ 19.95 Dinner ► NAME OF SOURCE ► NAME OF SOURCE ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IT ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE ► NAME OF SOURCE ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GITT(S) Comments:

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jerome E Horton

- Reminder you must mark the gift or income box.
- You are not required to report income from government agencies.

NAME OF SOURCE	► NAME OF SOURCE
CA Legislative Black Caucus Policy Institute	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5429 Madison Avenue	
CITY AND STATE	CITY AND STATE
Sacramento CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 10 / 16 / 09 - 10 / 17 / 09 AMT: \$ 695.00	DATE(S):
TYPE OF PAYMENT: (must check one) 🔀 Gift 🗌 Income	TYPE OF PAYMENT: (must check one) Gift , Income
DESCRIPTION: Meals and lodging	OESCRIPTION:
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Businass Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): AMT: \$	DATE(S):/
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) [] Gift [] Income
DESCRIPTION:	DESCRIPTION:
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

RECTORDATE Beceived

PRACTICES COMMISSION

10 HAR -1 PM 4:53

Please type or print in ink.

Candidate

Election Year: _

A Public Document

(cadi)	(FIR51)	(MIDULE)	DAY HWE TEFESHOME MANABER
Horton	Jerome	Edgar	
MAILING ADDRESS STREET May use business address)	City	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRES
1. Office, Agency, or Court		4. Schedule Summa	ary
Name of Office, Agency, or Court:		► Total number of pages	6
California State Board of Equaliza	ation	including this cover pa	ge: manuscamuscamusc
Division, Board, District, if applicable Fourth District	:	► Check applicable sched interests."	lules or "No reportable
Your Position:		I have disclesed interest attached schedules:	s on one or more of the
■ If filing for multiple positions, list a position(s): (Attach a separate s	additional agency(ies)/ sheet if necessary.)	Schedule A-1 Yes - Investments (Less than 10% C Schedule A-2 Yes - Investments (10% or greater C	wooshiji) - schedule attached
Agency:		Schedule B X Yes - Real Property	schedule attached
2. Jurisdiction of Office (ch	neck at least one box)	Income, Loans, & Business and Traval Payments)	schedule attached Positions (Income Other than Gifts
County of		Schedule D Yes -	schedule attached
City of		The state of the s	-schedule attached
Malti-County		Income – Gifts – Travel Pay	anents
Other	· · · · · · · · · · · · · · · · · · ·	-0	or-
3. Type of Statement (Check	k at least one box)	No reportable interest	s on any schedule
•	: good 9	5. Verification	
Annual: The period covered is Jathrough December 31, 2008.9 -Or- O The period covered is/_ December 31, 2008.		statement. I have reviewed	ole diligence in preparing this d this statement and to the best ation contained herein and in any and complete.
Leaving Office Date Left:/			rjury under the laws of the State going is true and correct.
O The period covered is January date of leaving officeor-	1, 2008, through lhe	Date Signed	OI/O (mg/mh, day, year)
O The period covered is/_ the date of leaving office.	/, through	Signature_	and the state of t

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 7	00
FAIR POLITICAL PRACTICES COMMI	SSION
Name	
	

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Horton & Associates	
Name 5777 W. Century Blvd., #1665	Name
Address (Business Arklress Acceptable)	Address (Business Address Acceptable)
Chuck one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE F AFPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 109 109 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,800,000
NATURE OF INVESTMENT Solo Proprietorship Parinership LLC Onior YOUR BUSINESS POSITION	NATURE OF INVESTMENT Solte Proprietorship Partnership Other YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
\$10,021 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,071 - \$10,000	\$61 - \$499
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)	▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one Dax:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check due hins:
INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity <u>or</u> Street Address or Assessor's Parcet Number of Real Property	Name of Business Enlity <u>or</u> Street Address or Assessor's Percel Number of Real Property
Description of Business Activity or City or Other Precise Lucation of Reat Property	Description of Business Activity <u>or</u> City or Other Precise Location of Reat Property
FAIR MARKET VALUE	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTERCST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leaschaid Oher Oher	i_easeholdOther
Direck box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2009/2010) Sch. A-2

SCHEDULE B Interests in Real Property (Including Rental Income)

COMMISSION

L CTOPPE ASSERTED ON STANDARD LANGUAGE	
STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
6221 Overhill	
CITY	CITY
Los Angeles, CA 90043	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 + \$100,006	\$10,001 \\$100,000
\$100,001 - \$1,000,000 ACQUIRED DISTOSED	\$100,001 - \$1,000,000 ACQUIRED 0ISPOSED
(Gver \$1,000.000	Qver \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
▼ Ownership/Deed of Trust	Ownership/Deed of Trust Eagender®
Leaseficible Yrs. remaining Other	Lepsehold
IF RENTAL FROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED ;
\$0 - \$499	\$0 \ \$499
\$10.001 - \$700,000 OVER \$100,000	\$10,001 - \$100,000 OYER \$100,000
[] STOCOL STOCKED	Dates 21000000
SOURCES OF RENTAL INCOME: If you own a 10% or greater inperest, list the plane of each tenght that is a single source of income of \$10,000 or more.	SCHERCES OF RENTACINCOME: If you own a 10% or greater interest, list the happe of each renant that is a single source of income of \$10,000 or more.
	mostric of the region of more:
Adrienne Dunham, Bernita DeGruy, Tamara	
Adrienne Dunham, Bernita DeGruy, Tamara	
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia	al lending institutions made in the lender's regular course ublic without regard to your official status. Personal loans of business must be disclosed as follows:
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of	ublic without regard to your official status. Personal loans of business must be disclosed as follows:
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of	ublic without regard to your official status. Personal loans of business must be disclosed as follows:
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER?	Ublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER* ALIDRESS (Business Address Acceptable)
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER?	ublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER*
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER? ADDRESS (Business Address Acceptable)	Ublic without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER* ALIDRESS (Business Address Acceptable)
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENBER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF CENDER	District without regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER* AUDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENGER INTEREST RATE TERM (Munits/Years)	District Rate Distri
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENGER INTEREST RATE TERM (Munits/Years)	District Rate Distri
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENGER INTEREST RATE TERM (Munibs/Years)	District Pacance During Reporting Period
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the puring and loans received not in a lender's regular course of the puring tender's regular course of the puring received not in a lender's regular course of the puring regular course of	District to the disclosed as follows: NAME OF LENDER* AUDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE PERM (Months/Years) Whene HIGHEST BACANCE DURING REPORTING PERIOD S500 - \$1,000
Adrienne Dunham, Bernita DeGruy, Tamara Jenkins You are not required to report loans from commercia of business on terms available to members of the pu and loans received not in a lender's regular course of NAME OF CENTIER* APDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF CENTIER UNTEREST RATE TERM (Munibs/Years)	Display thout regard to your official status. Personal loans of business must be disclosed as follows: NAME OF LENDER*

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF SOURCE OF INCOME	NAME OF SHURCE OF INCOME	
Horton & Associates LLC	City of Inglewood (Spouse	1
ALIDRESS (Business Address Acceptable)	ADDRESS (Bysiness Address Accep	<u> </u>
5777 W. Century Blvd., #1665	One Manchester Blvd.	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF S	DURCE
Real Estate / Business Consulting	Municipatity	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Partner	City Clerk	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
\$5G0 - \$1,000\$1,000 - \$10,000	\$500 - \$1,000\$1.	001 - \$10,q0q
Sth,nut - \$100,000 🗶 OVER \$100,000	▼ \$10,00! - \$100,000 □ DVI	ER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHIC!! INCI	OME WAS RECEIVED
Salary Spouse's or registered demostic partner's income	Salary Spouse's or regist	ared digniestic partner's income
☐ Loan repayment	[] Loan repayment	
Sale of	Safe of	
(Property, car, boal, etc.)	(Proj.	erty, car, boat, etc.)
Commission or Rental Inspire, its each series of \$10,000 or more	Dominission or Rental Incor	No. list each source of \$10,000 or more
□ Other	[Other	
Other	Citier ————————————————————————————————————	(Uescribe)
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI		
* You are not required to report loans from commercial of a retail installment or credit card transaction, marle available to members of the public without regard to y not in a lender's regular course of business must be considered.	in the lender's regular course our official status. Personal k	of business on terms
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SCHEDULE D Income - Gifts

CALIFORNIA FORM 7	00
FAIR POLITICAL PRACTICES COMMISS	SION

➤ NAME OF SOURCE	► NAME OF SOURCE
Michelle Steel	
ADDRESS (Business Address Acceptable)	AGGRESS (Busitess Address Acceptable)
550 Deep Valley Dr., Ste. 355 Rolling Hills Estate	
BUSINESS ACTIVITY, JE ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mn/dd/yy) VALUE DESCRIPTION OF G/FT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
09 , 23 , 09 s 19.95 Dinner	<u></u>
/\$	
► NAME OF SQUIRCE	► NAME OF SOURCE
ACORESS (Business Address Acceptable)	ABEIRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, JE ANY, OF SQURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (intribibilityy) VALUE DESCRIPTION OF SIFT(S)
NAME OF SIDURCE	► NAME OF SOURCE
AUURESS (Bushiess Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE ≀mm/sd/yy) VALUE DESCRIPTION OF GYFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	<u></u>
\$\$	
Comments:	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	

- Reminder you must mark the gift or income box.
- You are not required to report income from government agencies.

NAME OF SOURCE	► NAME OF SOURCE
CA Legislative Black Caucus Policy Institute	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Accopable)
5429 Madison Ave.	
CITY AND STATE	CITY AND STATE
Sacramento, CA 95814	(
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BIJSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 10 / 16 / 09 10 / 17 / 09 AMT: \$ 695.00	DATE(S):
TYPE OF PAYMENT: (must check one) 🗶 Gift 🔲 Income	TYPE OF PAYMENT: (must check ane) Gift [] Income
DESCRIPTION: Meals & Lodging	DESCRIPTION:
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	AlaDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SCURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S)://ANT: \$	EJATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
BESCRIPTION:	DESCRIPTION:
`	
Comments:	